



Event Details

PeopleSoft Strategic Sourcing

Event ID	Format	Type	Page
32110-0000009118	Sell	RFx	1
Event Round	Version		
1	1		
Event Name			
SWC 532 Clinical Lab Services			
Start Time		Finish Time	
10/16/2015 15:00:00 CDT		11/03/2015 10:00:00 CST	

Event Currency: US Dollar
Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

Submit To: General Services
 312 ROSA L PARKS AVE
 3rd Floor
 NASHVILLE TN 37243
 United States
Contact: Mike Leitzke
Phone: 615/741-5666
Email: michael.s.leitzke@tn.gov

Event Description

This event is to bid for a three (3) year with two (2), one-year options to renew contract for Clinical Lab Services for the State of Tennessee.

Specifications and terms & conditions are attached.

READ THE ENTIRE BID, including the Event Details, Specifications, and Terms and Conditions and any other attachments.

The purpose of this Invitation to Bid Event/Source of Supply Event is to establish a term contract (s) to provide Clinical Lab Services for the State of Tennessee, with products and/or services as described in the attached terms, conditions, specifications, and price sheet.

A term contract means a contract in which a source or sources for supply are established for a specified period of time at an agreed upon price(s).

If the Review and bid on this event link included in the e-mail notification does not work, please go to <http://www.tn.gov/generalservices/article/bidder-registration>. Click on the link that says "Register as a Bidder or find Bid Opportunities" and log in with your vendor ID and password.

NOTE: Need help with EDISON? Call the Edison HELP Desk at 866-376-0104 or 615-741-4357.

Please do not wait until the last day to POST YOUR BID. The Edison system will sign you out after 30 minutes of inactivity. Your password expires EVERY 90 DAYS. It is the responsibility of the Edison User (bidder/vendor) to maintain their own profile information (Email address, phone numbers, address or contacts) and to continue to keep it current by logging into the Supplier Portal and making changes as needed.

Central Procurement Office Website: <http://www.tn.gov/generalservices/section/central-procurement-office>. The website is constantly being updated with information to assist the agencies and vendors; you are encouraged to check the website frequently.

If you have questions, please contact the Solicitation Coordinator, Mike Leitzke, at (615) 741-5666 or michael.s.leitzke@tn.gov

General Questions

Question	UOM	Best	Worst	Response
How many days after receipt of purchase order will it take you to deliver this item? Required: Yes Mandatory ResponseNo		0		

Response Comments

Please enter the number of days that your bid offer will expire from the bid opening date:
 Required: Yes Mandatory ResponseNo

0



Event Details (cont.)

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Event Round	Version		
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SWC 532 Clinical Lab Services			
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Bids allowed in other currency: No

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Response Comments

Associated Terms:

Bid Offer Expiration

Enter the expiration date of your bid offer in the space provided on this Invitation to Bid. A minimum period of thirty (30) days from the bid closing date is requested. The state shall have sixty (60) days to accept the bid if a minimum period is not stated.

Please complete the attached form, included with the Terms and Conditions document, and attach all pertinent documentation regarding your company's efforts to achieve diversity business participation. This information must be submitted with the bid document and monthly thereafter until a reasonable level of diversity business participation is achieved.

Confirm below that you have completed this attached form by choosing, "Yes".

Required: Yes Mandatory Response: Yes

Yes

Response Comments

Authorized Users: Local Governments, Private Non-Profit Institutions of Higher Education and Eligible Non-Profit Agencies

The purpose of this Invitation to Bid/Sourcing Event is to establish a source or sources of supply for all state agencies, local governmental units within the geographic limits of the State of Tennessee, any private nonprofit institution of higher education chartered in Tennessee, and any corporation which is exempted from taxation under 26 U.S.C. Section 501(c)(3) as amended and which contracts with the Department of Mental Health and Mental Retardation to provide services to the public (T.C.A. 33-2-401 et seq.). The resulting contract will be open to these governments unless a letter is attached to your bid, addressed to the Central Procurement Officer, requesting exemption to this allowance.

Purchases by local governmental units, private institutions of higher education, and authorized corporations are encouraged but are optional with those agencies, private institutions of higher education, and corporations.

Note: If "no", attach exemption request addressed to the Central Procurement Officer.

Yes



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Event Round	Version		
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Event Name			
SWC 532 Clinical Lab Services			
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Event Currency: US Dollar
Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

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ReqYes Mandatory ResponseNo

Response Comments

Associated Terms:

Purchases by Local Government and Authorized Non-Profit Agencies (SWC) - T500

Authorized Users: Local Governments, Private Non-Profit Institutions of Higher Education and Eligible Non-Profit Agencies

The purpose of this Invitation to Bid/Sourcing Event is to establish a source or sources of supply for all state agencies, local governmental units within the geographic limits of the State of Tennessee, any private nonprofit institution of higher education chartered in Tennessee, and any corporation which is exempted from taxation under 26 U.S.C. Section 501(c) (3) as amended and which contracts with the Department of Mental Health and Mental Retardation to provide services to the public (T.C.A. 33-2-401 et seq.). The resulting contract will be open to these governments unless a letter is attached to your bid, addressed to the Chief Procurement Officer, requesting exemption to this allowance.

Purchases by local governmental units, private institutions of higher education, and authorized corporations are encouraged but are optional with those agencies, private institutions of higher education, and corporations.

All bidders are required to have an adequate service organization for which the bid is applicable. Enter the name, address, telephone, pager or cell phone and fax number, email address, and area of responsibility for each service representative in the spaces provided below. (Attach additional sheet if necessary) Please be sure to include the following information:

List the Service Organization:
List the Service Organizations Address:
List the Area(s) in TN that the Service Organization will Service:
List the Service Organizations Phone Number:
List the Service Organizations Toll Free Number:
List the Service Organizations Pager or Cell Phone:
List the Service Organizations Fax Number:
List the Service Organizations Email Address:
List the Service Organizations Website:
Required: Yes Mandatory ResponseNo

Response Comments

Associated Terms:

Service Organization

All bidders are required to have an adequate service organization for which the bid is applicable. Enter the name, address, telephone, pager or cell phone and fax number, email address, and area of responsibility for each service representative in the spaces provided below. (Attach additional sheet if necessary)



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Service Experience, Time in Business, Contracts

List the Length of Time Your Company has been in Business. A bidder must have occupied a bona fide place of business for at least one year with suitable equipment, supplies and a trained staff capable of performing the services requested.

List the Description of Services. Please enter the information for three (3) comparable contracts on-going or completed within the last two (2) years.

Comparable Contract

List Name/Address of Comparable Contract

List the Contact Person

List the Phone Number

List the Contact Person's Email Address.
 Required: Yes Mandatory Response No

Response Comments

Associated Terms:

Service Experience, Time in Business - Contracts

A bidder must have occupied a bona fide place of business for at least one year with suitable equipment, supplies and a trained staff capable of performing the services requested. A bidder must furnish satisfactory evidence of successful completion of comparable contracts for at least three customers within the past two years and any other evidence required and requested in order to establish evidence of its ability to provide services in accordance with the terms and conditions and specifications. Enter the length of time in business and evidence of completion of three comparable contracts in the space provided below.

Failure to provide at least three comparable contract references with satisfactory quality of service may result in the bid being considered non-responsive and cause for rejection of the bid.

Technical Assistance

Enter the name, address, and telephone number of the technician or service representative in the space provided below.

List the Name of the Technician/Service Representative

List the Technician/Service Representative Address

List the Technician/Service Representative Phone Number

List the Technician/Service Representative Toll Free



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SWC 532 Clinical Lab Services			
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Bidder: PUBLIC EVENT DETAILS

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Phone Number

List the Technician/Service Representative Pager or Cell Number

List the Technician/Service Representative Email Address

List the Technician/Service Representative Website
Required: Yes Mandatory ResponseNo

Response Comments

Associated Terms:

Technical Assistance

The vendor/contractor will furnish telephone technical assistance for the type of equipment or services requested within the time frame listed in the attached specifications following and without additional cost to the state.

Enter the name, address, and telephone number of the technician or service representative in the space provided below.

Please list the following for all licenses and permits required by federal and state law.

List the Type of License
List the Name on the License
List the License Number
List the Expiration Date

Required: Yes Mandatory ResponseNo

Response Comments

Associated Terms:

Licenses (Listings):

A bidder must have all licenses and permits required by federal, state and local laws for performance of this contract. List the date and description of each in the space provided below.

Please list the following information regarding your company's contract administrator.

List the Contract Administrator's Name

List the Contract Administrator's Address

List the Contract Administrator's Phone Number

List the Contract Administrator's Toll Free Phone Number

List the Contract Administrator's Pager or Cell Number



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Event Name			
SWC 532 Clinical Lab Services			
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Event Currency: US Dollar
Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

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 United States
Contact: Mike Leitzke
Phone: 615/741-5666
Email: michael.s.leitzke@tn.gov

List the Contract Administrator's Email Address

List the Contract Administrator's Website
 Required: Yes Mandatory ResponseNo

Response Comments

Associated Terms:

Vendor Contract Administrator

The bidder shall list their company's Contract Administrator. The Contract Administrator shall be the contact person for all questions regarding the contract. Note: The bidder can attach a list of alternate personnel to contact to the bid.

The bidder shall indicate whether or not they plan to sub-contract:

No: The bidder does not anticipate using a sub-contractor at this time and agrees to submit a request to subcontract during the contract period prior to using a subcontractor.

Yes: The bidder shall list the subcontractor(s). Attach list of additional subcontractors to the bid, including the following for each subcontractor.

List the Sub-Contractor's Name

List the Sub-Contractor's Address

List the Sub-Contractor's Contact Person

List the Sub-Contractor's Phone Number

No

Required: Yes Mandatory ResponseNo

Response Comments

Associated Terms:

Subcontracting

The Contractor shall not assign this Contract or enter into a subcontract for any of the goods or services provided under this Contract without obtaining the prior written approval of the Central Procurement Office. Notwithstanding any use of approved subcontractors, the Contractor shall be the prime contractor and shall be responsible for all work provided.

A link to the Central Procurement Office's surveying tool is available at
<https://www.surveymonkey.com/s/CPOCustomerServiceSatisfactionSurvey>.



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Event Name			
SWC 532 Clinical Lab Services			
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Event Currency: US Dollar
Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

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We ask that you take a few short minutes to complete this survey. The purpose of this survey is to strengthen procurement processes of the Central Procurement Office (CPO) by capturing Vendor/Bidder assessments of, and actionable comments on, the process put in place by the Central Procurement Office. Your responses will remain anonymous, and will have no bearing or consideration in the awarding of this procurement.

Required: No Mandatory ResponseNo

Response Comments

I (we) agree to strictly abide by all the statutes and terms contained in the rules of the Department of General Services, Central Procurement Office, which are by reference made a part hereof, in addition to the special terms, conditions and specifications embodied in the invitation to bid.

IMPORTANT: By Selecting YES, the bidder certifies compliance with the above and further certifies that this bid is made without collusion or fraud.

Yes

Required: Yes Mandatory ResponseYes

Response Comments

Provide pricing to this solicitation on SWC 532 Clinical Lab Services Pricing Model and include as attachment in Edison.

Yes

Required: Yes Mandatory ResponseNo

Response Comments

The contractor shall be registered with the Department of Revenue for the collection of Tennessee sales and use tax. This registration requirement is a material requirement of this Contract.

Please see Attachment F for instructions on completing the Registration for Sales and Use Tax in Tennessee.

Required: Yes Mandatory ResponseNo

A file attachment is required to satisfy this question.
Your bid will need to be edited online to include attachment responses.



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Event Round	Version		
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Event Name			
SWC 532 Clinical Lab Services			
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Event Currency: US Dollar
Bids allowed in other currency: No

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Response Comments

Confirm that your company will accept the State's Purchasing Card (P-Card) as defined in Terms & Conditions, Special Terms & Conditions "B.3.k. Prerequisite Documentation."
Required: Yes Mandatory ResponseNo Yes

Response Comments



Event Details (cont.)

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32110-0000009118	Sell	RFx	9
Event Round	Version		
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Event Name			
SWC 532 Clinical Lab Services			
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Line Details

Line: 1 Item ID: Line Qty: 1.00 UOM: Each
Required: Yes Reserve Price: No

Bid Qty:

Description: Dummy Line: Do not bid here. Please bid on the attached Cost Proposal

Question	UOM	Best	Worst	Response
What is the unit price of this item?		0		<input type="text"/>

Required: Yes Mandatory Response: No

Response Comments



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Event ID	Format	Type	Page
32110-0000009118	Sell	RFx	10
Event Round	Version		
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Event Name			
SWC 532 Clinical Lab Services			
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Event Currency: US Dollar
Bids allowed in other currency: No

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Bidder Information

Firm Name:		
Name:	Signature:	Date:
Phone #:	Fax #:	
Street Address:		
City & State:	Zip Code:	
Email:		



Event Details (cont.)

PeopleSoft Strategic Sourcing

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32110-0000009118	Sell	RFx	11
Event Round	Version		
1	1		
Event Name			
SWC 532 Clinical Lab Services			
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Event Currency: US Dollar
Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

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United States

Contact: Mike Leitzke
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Event Details (cont.)

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32110-0000009118	Sell	RFx	12
Event Round	Version		
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Event Name			
SWC 532 Clinical Lab Services			
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10/16/2015 15:00:00 CDT	11/03/2015 10:00:00 CST		

Event Currency: US Dollar
Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

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United States
Contact: Mike Leitzke
Phone: 615/741-5666
Email: michael.s.leitzke@tn.gov

Appendix B - Terms & Conditions

1. The undersigned acknowledges that all submitted information and documentation will become the property of the state of Tennessee. The undersigned also affirms that the information given above is true, accurate, and includes pertinent information necessary to identify and explain the operation of this organization to the best of my knowledge and is in no way misleading.
2. Should any data change in the future, the Supplier agrees to immediately submit the correct information electronically through the state's Supplier Portal or the information will be submitted in writing and mailed to one of the following addresses:

If the supplier is actively bidding but has not yet been awarded a purchase order or contract, please submit changes to the following address:

Tennessee Department of General Services
Purchasing Division
3rd Floor Tennessee Tower
Nashville, TN 37243

If the supplier is currently doing business with the state please submit changes to the following address:

Department of Finance and Administration

3. No person on the grounds of handicap or disability, age, race, color, religion, sex, national origin, or any other classification protected by Federal and/or Tennessee State constitutional and/or statutory law shall be excluded from participation in, or denied benefits of, or be otherwise subjected to discrimination in the performance of the Contract or in the employment practices of the Contractor. The Contractor shall, upon request, show proof of such non-discrimination, and shall post in conspicuous places, available to employees and applicants, notices of non-discrimination.
4. The undersigned acknowledges that all submitted information and documentation will become the property of the state of Tennessee. The undersigned also affirms that he/she is a legal citizen of the United States or Permanent Resident Alien and that the information given above is true, accurate, and includes pertinent information necessary to identify and explain the operation of this organization to the best of my knowledge and is in no way misleading.

Last Updated: 06/11/2009